SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES

State of Nevada

REPORT NUMBER 1 - DUE AUGUST 29 Report Period Began: December 21, 1996, for an office with a four Report Period Began: December 19, 1998, for an office with a two	Telephone Number 7, 2000 PILED
Report Period Began: December 17, 1994, for an office with a six Report Period Began: December 21, 1996, for an office with a four	2000 PILED
Report Period Began: December 17, 1994, for an office with a six Report Period Began: December 21, 1996, for an office with a four	Veer term
	r year term MAY 2,5,2000
Report Period Ends: August 23, 2000	Secretary of State
Cash on hand from previous campaign (should equal the balance show of unspent contributions report), if any	wn on your last disposition
1. Total Amount of contributions in excess of \$100	-A
2. Total amount of contributions of \$100 or less	30_
Actual number of contributions of \$100 or less	
3. Interest and income earned, if any	6
4. TOTAL AMOUNT OF ALL CONTRIBUTIONS	
(add lines 1 through 3)	30,-
EXPENSES SUMMARY	
5. Total amount of expenses in excess of \$100	6
6. Total amount of expenses of \$100 or less	6 60 F
7. Expense for filing fee	305
8. TOTAL AMOUNT OF ALL EXPENSES	
(add lines 5 through 7)	30,

Total number of pages for this report

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C.	AMI	PAIGN	CONTR	IBUTIONS

R	EP	ORT	PERIOD	Number	1
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Ros	BenHey	rehool	trurtee	E
Candidate's Name (pri	int)	Of	fice	District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed of \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK / IF IN KIND
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Rob Bentley	school trustee	E
Candidate's Name (print)	Office	District (if applicable)

Contributions of \$100 or Less

DATE OFEACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION		DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
डीळि	305			
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		/		

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PAGE 3 OF 6

Rob Bentley (cheel tourtee <u>E</u>
Candidate's Name (print) Office District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	6
Expenses related to volunteers	В	6
Expenses related to travel	С	4
Expenses related to advertising	D	6
Expenses related to paid staff	E	4
Expenses related to consultants	F	-
Expenses related to polling	G	6
Expenses related to special events	Н	6
Goods and services provided in kind for which money would otherwise have been paid	I	0
Other miscellaneous expenses	J	6

PAGE 4 OF 6

Rob	Bentley	ochool t	rurtec.	£	
Candidate's Name (pr	int)	Office		District (if applicable)	

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON; GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE

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Rds	BenHe	school	trurtee	E
Candidate's Name (print,	, ,	Office	!	District (if applicable)

Expenses of \$100 or Less

DATE AMOUNT OF EACH EXPENSE	CATEGORY	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
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SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES 2000 PRIMARY AND GENERAL ELECTIONS

State of Nevada

Bob Bendley school trustee	E
Candidate's Name(print) Office	District (if applicable)
1770 Corlin Reno 89503	747-3002
failing Address (include city and zip code)	Telephone Number
REPORT NUMBER 2 - DUE OCTOBER Report Period Begins: August 24, 2000 Report Period Ends: October 25, 2000 CONTRIBUTIONS SUMMARY	31, 2000 o
1 F. D. A. N. L.	· / ·
1. From Report Number 1, total amount of contributions in excess of \$100	
2. From Report Number 1, total amount of contributions of \$100 or less	
 3. Report Number 2, amount of contributions in excess of \$100 4. Report Number 2, total amount of contributions of \$100 or less 	
From Report Numbers 1 and 2, actual number of	
contributions of \$100 or less	
5. Interest and income earned, if any, during this report period	
6. TOTAL AMOUNT OF ALL CONTRIBUTIONS	
(add lines 1 through 5)	
EXPENSES SUMMARY	
7. From Report Number 1, total amount of expenses in excess of \$100	
8. From Report Number 1, total amount of expenses of \$100 or less	
9. Report Number 2, total amount of expenses in excess of \$100	
10. Report Number 2, total amount of expenses of \$100 or less	
11. TOTAL AMOUNT OF ALL EXPENSES	
(add lines 7 through 10)	
o contributions or expenses are listed during this Report Period, only this page of filing officer.	of the report needs to be filed w
I declare under penalty of perjury that the foregoing is true and correct. Executed on	n Aus

Prescribed by Secretary of State NRS 294A 120, 294A 200 EL201 002(rev 04/00) Date

Total number of pages for this report __

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Candidate's Name (print)		Office		District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK / IF IN KIND
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PAGE _____OF ____

Rob Bentley Office Elevel Frenche E

Candidate's Name (print)

Office District (if applicable)

Contributions of \$100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION		DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
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PAGE 3 OF 6

Reb	Bentle	rchal	fruite	E	
Candidate's Name	(print)	Office		District (if applicable)	

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	Н	
Goods and services provided in kind for which money would otherwise have been paid	ı	
Other miscellaneous expenses	J	

PAGE 4 OF 6

Rob Bentley	school	trudec	E	
Candidate's Name (print)	Office		District (if applicable)	

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
EXPENSE(S)			
		6	

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PAGE____OF___6

Reb Bentley (check district trustee = District (if applicable)

Expenses of \$100 or Less

DATE OREACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY		DATE OF EACH EXPENSE		AMOUNT OF EACH EXPENSE	CATEGORY
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Total number of pages for this report

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Candidate's Name (print)		Office		District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK / IF IN KIND
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PAGE 2 OF 6

Rb	Bendle	school	trustec	互.
Candidate's Name (p	rint)	Offic	ce	District (if applicable)

Contributions of \$100 or less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION		DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
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PAGE 3 OF 6

Reb	Rendley	school	trudee	E
Candidate's Name (print)	,	Office		District (if applicable,

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	
Expenses related to paid staff	E	/
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	н	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	
Goods and services provided in kind for which money would otherwise have been paid	I	

PAGE 4 OF 6

Reb	Bentles	se heet	trudec	E	
Candidate's Name (print)	Office		District (if applicable)	

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
			6

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PAGE	OF

Red	Bendley	Theel trust	ec E	
Candidate's Name (p	print)	Office	District (if applicable)	

Expenses of \$100 or Less

DATE OF EACH EXPENDITURE	AMOUNT OF EACH EXPENDITURE	CATEGORY		DATE OF EACH EXPENDITURE	AMOUNT OF EACH EXPENDITURE	CATEGORY
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Disposition of Unspent Contributionsfiled

Reporting Form for Candidates (NRS 294A.180)

Total number of pages for this report _

May 26

State of Nevada

			MINI DO LOS
BEFORE (This page may	COMPLETING TI	HIS FORM, PLEASE READ THE R d if additional space is needed, but all pages:	EQUITE OF STATE ON PAGE TWO must be attached when the report is filed)
NOTE: Any pers	on who willfully vi		bject to a civil penalty of not more tha
Rob	Bentley	h /4	Nr/A
Name (print)	7	Office Held	District
DATE OF THIS	•	☐ 15th day of the second month after his election if contributions remain	
		PENT CAMPAIGN AS OF JANUARY 1, 2000: \$	6
(This was and all and		EXPLANATION OF DISPOSITION	
AMOUNT:	reflect any rem	DISPOSITION:	om your previous election cycle only.
\$		DISTOSTITON.	/
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REMAINING BAL	ANCE OF UNSPE	NT CAMPAIGN CONTRIBUTIONS	S: \$
I do hereby swear ((or affirm) under po	enalty of perjury that the assertions	contained in this report are true
this $\partial \mathcal{F}$	day of	more to , date	70
W	A TA		
Signature of Public Of	ficer	Office Use Onl	у
Rame of Public Office	BenHey		
1770 Street Address	Carlin		
Mailing Address if Diff	MU go		
City and State Daytime Telephone No.	Zip Cod 747-3005 umber		